DATENT	ADDI ICATION	FEE DETERMINATION	DECORD
PAIENI	APPLICATION	FEE DETERMINATION	RECORD

Effective October 1, 2001												
CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALI TYPE	 _ EI	NTITY	OR	OTHER SMALL		
TOTAL CLAIMS		26				RAT	E	FEE	1	RATE	FEE	
FOR		NUMBER FILED		NUMBER EXTRA		BASIC	FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS		26 minus 20=		* 6		X\$ 9	=		OR		\$108.00	
INDEPENDENT CLAIMS			5 minus 3 = *		* /	1		=			¥0.4	
MULTIPLE DEPENDENT CLAIM PRESENT				•					OR		\$168.00	
# If the difference in column 1 is less than 100 is a standard 100 is a standard						olumn 2	+140	=		OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in column 2						olumn 2	TOTA	۱L		OR	TOTAL	\$276.00
CLAIMS AS AMENDED - PART II							CMA			0.0	OTHER	
		(Column 1) CLAIMS		(Colu	mn 2) IEST	(Column 3)	SMA	LL 1	ENTITY	OR	SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVI PAID		PRESENT EXTRA	RAT	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=	
	Independent	*	Minus	***		=	X42	=		00	X84=	
Ĺ	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	T CLAIM			-		OR	·	
							+140			OR	+280=	
							TO ADDIT. F			OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu		(Column 3)						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	RAT	Ξ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=	
	Independent	*	Minus	***		=	X42:			OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140	=		OR	+280=	·
							TOT ADDIT. F			OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)	ADDIT. I	L			ADDII. FEEI	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST IBER OUSLY -	PRESENT EXTRA	RATE		ADDI- TIONAL FEE	-	RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9			OR	X\$18=	
	Independent	*	Minus	***	•	=	X42=	-				
٩	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	T CLAIM		A42	4		OR	X84=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								=		OR	+280=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE												
		nber Previously Pa					er found in the	арр	ropriate box	in co	lumn 1.	

Application or Docket Number